



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

BOTTLE # 1639

BREATH ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 204167 DATE OF INSPECTION 05-29-09

LOCATION OF INSTRUMENT (STREET AND CITY) 333 S. LAMINE, SEDALIA, MO (P.C.S.D.) TIME OF INSPECTION 14:21

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER 49 °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS

☒ TIME AND DATE 14:21 05/29/09

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 33.9 °C

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 0.095%

TEST 2 0.097%

TEST 3 0.098%

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS / (0-.04) / (.05-.09) / (.10-.14) / (.15-.19) 4 (Over .19) 3

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

THIS INSTRUMENT IS OPERATING WITHIN THE GUIDELINES SET FORTH BY THE MISSOURI DEPARTMENT OF HEALTH

SOLUTION: GUTH LOT # 08240

EXPIRES: 07-14-09

CONCENTRATION: 0.100%

INSPECTING OFFICER

SIGNATURE TPR. M. DEGRAFFENREID

PRINT NAME TPR. M. DEGRAFFENREID

TYPE / PERMIT NUMBER/EXPIRATION DATE 820193 / 06-13-2010

TELEPHONE NUMBER (816) 622-0800



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-684-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 08240 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1221 percent (w/vol) ethyl alcohol. The expiration date for this lot number is July 14, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 204167

05/29/09

14:21

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 49C

FLOW DETECTOR: OKAY

PUMP: OKAY

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

! " # \$ % & ' () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G
H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G

Operator Signature

T. M. DeStefano

2208-02

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 204167

05/29/09

TESTING OFFICER:

DEGRAFFENREID/W/D

OFFICER I.D.: 334

PERMIT NUMBER: 020193

EXPIRATION DATE: 06/13/10

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST

INTERNAL STANDARD

EXTERNAL STANDARD

BLANK TEST

EXTERNAL STANDARD

BLANK TEST

EXTERNAL STANDARD

BLANK TEST

N = 3

SIM. = .1

AVG. = .0966

	0.00	14:26
INTERNAL STANDARD	0.00	14:26
EXTERNAL STANDARD	0.00	14:26
BLANK TEST	0.00	14:27
EXTERNAL STANDARD	0.00	14:27
BLANK TEST	0.00	14:28
EXTERNAL STANDARD	0.00	14:28
BLANK TEST	0.00	14:29
EXTERNAL STANDARD	0.00	14:29

Operator Signature

T. M. DeStefano

2208-02

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204167
05/29/09

ARREST TIME: 14:00

SUBJECT NAME:

RFI

DOB: 05/29/09 SEX: M

STATE/D.L.: MO/NA

ARRESTING OFFICER:

DEGRAFFENREID/M/D

OFFICER I.D.: 334

TESTING OFFICER:

SAME

OFFICER I.D.: 334

PERMIT NUMBER: 820193

EXPIRATION DATE: 06/13/10

MISCELLANEOUS DATA:

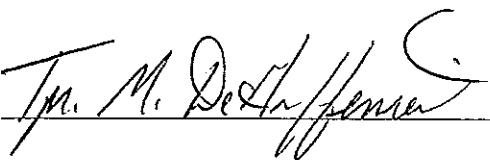
--- BREATH ANALYSIS ---

BLANK TEST .000 14:33

INTERNAL STANDARD VERIFIED 14:33

RADIO INTERFERENCE

Operator Signature



2208-02

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



MARK DEGRAFFENREID

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 06/13/08

Number 820193

Expires 06/13/2010

MD 580-0771 (7-88)

Eric C. Pollock
Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

DATAMASTER SN 970038	DATE OF INSPECTION 5-29-09
LOCATION OF INSTRUMENT (STREET AND CITY) Manlyville MO	TIME OF INSPECTION 1858

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 48 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

☒ INDICATOR LIGHTS

☒ TIME AND DATE

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) **33.98**

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE
(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 .99	TEST 2 .100	TEST 3 .101
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☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS	(0-.04) 0	(.05-.09) 0	(.10-.14) 0	(.15-.19) 0	(OVER .19) 0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

60th lobs **lot # 08340** **EXP. 10.15.09**

% BAC .100

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Charles Myrick
TYPE II PERMIT NUMBER/EXPIRATION DATE 820297 10.15.10	TELEPHONE NUMBER (600) 562-1254